

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90052 040 ****50.00

DOCUMENT # L01000008111

1. Entity Name
HVP, SYSTEMS, LLC



Principal Place of Business
**4975 FAWN RIDGE PLACE
SANFORD, FL 32771**

Mailing Address
**4975 FAWN RIDGE PLACE
SANFORD, FL 32771**

DO NOT WRITE IN THIS SPACE



04132006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
01-0597467

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BURNEY, LANCE
4975 FAWN RIDGE PL
SANFORD, FL 32771**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

LANCE Burney M

(NOTE: Registered Agent signature required when reinstating)

3/31/06

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
BURNEY, JAMES L
1475 FAWN RIDGE PL
SANFORD, FL 32771**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
BURNEY, KIMBERLY L
4975 FAWN RIDGE PL
SANFORD, FL 32771**

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Lance Burney M

3/31/06

Date

407-328-4479

Daytime Phone #